

Please note: We reserve the right to remove a Junior Leader from the program if his/her attendance is inconsistent or if actions are not in compliance. We will notify parent(s) of the decision if it is deemed necessary. **Deadline is December 13th 2019** to turn in applications.

# Junior Leader Program Application

*Please Print Legibly*

Name: \_\_\_\_\_  
 (Last) (First)  
 D.O.B: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M or F Shirt Size: \_\_\_\_\_  
 Phone number (to be used for phone interview): \_\_\_\_\_  
 Email: \_\_\_\_\_

Mother/Legal Guardian full name: \_\_\_\_\_  
Phone (cell): \_\_\_\_\_ Phone (work): \_\_\_\_\_

Father/Legal Guardian full name: \_\_\_\_\_  
Phone (cell): \_\_\_\_\_ Phone (work): \_\_\_\_\_

Location Preference: (Kalaheo Kato Gym and Lihue NC)

1st choice: \_\_\_\_\_

2nd choice: \_\_\_\_\_

If you will be out for **one week or more** please provide dates and reasoning here:

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### Volunteer Experience:

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What is your main reason for wanting to be a Junior Leader?

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### Why should you be chosen as a Junior Leader?

[illegible]

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APPLICANT’S WAIVER OF CLAIM AND INDEMNITY AGREEMENT FOR COUNTY OF  
KAUAI’S SUMMER ENRICHMENT PROGRAM

For and in consideration of the County’s providing the Summer Enrichment Program, we, the undersigned, jointly, individually and in any representative or legal capacity, on behalf of our respective selves, heirs, executors and/or administrators do hereby waive, release, discharge and agree to hold harmless and indemnify the COUNTY OF KAUAI, its officers, employees and agents, individually and in their official capacity, from all liability or loss of any claim for death, injury, or damage to property resulting directly or indirectly from the undersigned participant’s participation in the program. We further avow that our aforesaid waiver, release, discharge and agreement shall be applicable to any owner of a facility and/property at or upon which the program is held.

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PRINTED NAME of parent or legal guardian

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DATE

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SIGNATURE of parent or legal guardian